									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003									FMCE-P103				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN		
TOTAL CLAIMS			in					RATE		FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			49 minus 20=		· 29 ·			X\$ 9:	_		OR	X\$18=	522
INDEPENDENT CLAIMS			3 minus 3 =		* 6			X43=		<u> </u>	OR	X86=	<u> </u>
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=			OR	+290=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				١	TOTA	L		OR	TOTAL	1092
CLAIMS AS AMENDED - PART II									. •			OTHER	THAN
(Column 1) (Column 2) (Column 3)								SMAL	L E	NTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUME PREVIO	BER DUSLY	PRESENT EXTRA		RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=	
ME	Independent	*	Minus	***		=		X43=			OR	X86=	**
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							4.45	7			. 200	
							L	+145= TOT/			OR	+290= TOTAL	
								ADDIT. FE			OR	ADDIT. FEE	
		(Column 1) CLAIMS	1	(Colun		(Column 3)	1 r	<i>:</i>	T	ADDI-	1 1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVICE PAID I	USLY	PRESENT EXTRA		RATE		TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=	
	Independent	*	Minus	***		=		X43=	1		OR	X86=	
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL								1			000	
							L	+145=			OR	+290= TOTAL	
						•	A	ADDIT. FE			OR	ADDIT. FEE	
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE		ADDI- FEE		RATE	ADDI- TIONAL FEE
ΔDM	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=	
MEI	Independent	*	Minus	***	•	=		X43=	1		OR	X86=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDENT	CLAIM				ŧ				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+290=	-
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											OR ,	TOTAL ADDIT. FEE	
		ber Previously Paid					r four	nd in the a	appr	opriate box	in col	umn 1.	